

**FIRST AMENDMENT
TO
AGREEMENT TO PROVIDE PROFESSIONAL SERVICES
Between
THE SANTA BARBARA COUNTY FIRE DEPARTMENT
And
CENTRALSQUARE TECHNOLOGIES, LLC**

THIS FIRST AMENDMENT TO FIRE PROTECTION AGREEMENT (hereafter “AMENDMENT”) is made by and between the Santa Barbara County Fire Department (hereafter FIRE), and Centralsquare Technologies, LLC (hereafter Centralsquare) wherein Centralsquare agrees to extend services through December 31, 2025.

WHEREAS, Centralsqaure agreed in that AGREEMENT TO PROVIDE PROFESSIONAL SERVICES (hereafter “AGREEMENT”); and

NOW, THEREFORE, in consideration of the mutual covenants and conditions contained herein, the parties agree to amend that AGREEMENT pursuant to this AMENDMENT as follows:

EXTEND THE CONTRACT TO DECEMBER 31, 2025: Mark Hartwig, Fire Chief, at phone number (805) 681-5500 is the representative of FIRE and will administer this AGREEMENT for and on behalf of FIRE. Mr. Ron Anderson, Chief Revenue Officer, at phone number (407) 514-9234, is the authorized representative for CentralSquare. Changes in designated representatives shall be made only after advance written notice to the other party.

CONTINUED FORCE AND EFFECT: All other Terms of the AGREEMENT not expressly amended by this AMENDMENT shall continue in full force and effect for the Term of such AGREEMENT.

IN WITNESS WHEREOF, the parties have executed this AMENDMENT to be effective on the date it is fully executed.

COUNTY OF SANTA BARBARA

By: _____
Laura Capps, Chair
Board of Supervisors

SANTA BARBARA COUNTY FIRE
DEPARTMENT

Signed by: _____
By: _____
643284E63CDE490
Mark Hartwig, Fire Chief/Fire Warden

ATTEST:

MONA MIYASATO,
COUNTY EXECUTIVE OFFICER

CENTRALSQUARE TECHNOLOGIES, LLC

By: _____
Deputy Clerk

DocuSigned by: _____
By: _____
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Ronald Anderson, Chief Revenue Officer

APPROVED AS TO FORM:
COUNTY COUNSEL

Signed by:
By: Tyler Sprague
0AC56B8DE45F483...
Deputy

APPROVED AS TO ACCOUNTING FORM:
AUDITOR-CONTROLLER

Signed by:
By: Shawna Jorgensen
DF6DB6D7D6344E6...
Deputy Auditor-Controller

APPROVED AS TO FORM:
RISK MANAGER

DocuSigned by:
By: Samantha Francis
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